## LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

## To Be Filed By:

I.-2

LOBBYISTS (Sec. 67-6619)

Page of Page(s)
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2005 DEC 29 AM 8: 48

or print clearly in black ink)
structions at bottom of page

SECRETARY OF STATE
STATE OF IDAHO

		(Type or print of See instructions							STAT	EC	FINH	) <u>.                                 </u>		
Lobbyis	it's name and p	ermanent busine					D	ate į	repared	-		Period (	covered	
Roge	r Batt												year endi	ing
	N 5th Ave								12/28/05	5		(Mo.)	(Day)	(Yr.)
Merk	lian, ID 83	042					ı							1
Item 1	Totals	of all reportab	de exp	enditures made or	r incum	ed by Lobb	yist c	r by	Lobbyist's Emple	oyer	on behalf of	Lobb	yist's Empl	oyer.
	itegory of Ex		* To	otal Amount for		ortionate amo			buted by each emp	oyer	(Identify em	ployen	s, under	
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All Employers		Employer No. 1		. 1	1	imployer No. 2	Employer No. 3		o. 3	Employer No. 4	
	ainment and Refreshm	nent	s _	510.86	<b>s</b> _	510.	86	\$.		s.			s	
Living	Accommoda	ations			_					_				
Adver	tising				_					۱.				
Travel			_	625.00	<b> </b> _	350.	00		275.00	  -				
Telephone			_	675.00	4		.00	 	250.00	l _				
Other Expenses or Services 265.00				175.00		.00	<b>.</b>	90.00	l _					
		Total	<b>\$</b> _	2,075.86	s_	1,460	.86	\$	615.00	\$	0	.00	\$	0.00
	When the num	ber of employer	s you a	re reporting for requ	ires mu	ltiple L-2 for	ms to	l be fil	led a total amount fo	 ਸ <b>ਕ</b> ੀ-	employers sho	ould be	entered on P	age 1.
Item		of each expend	liture (		dollars				or other holder o					
	Date			Place		^	moun		Names o	of Le	gislators & Pu	blic Of	ficials in Gro	oup
0	1/20/05		The (	Grove Hotel		5	10.86	3	Sen. Joyce					•
									Rep. Eric Mike Moyl			•		
									Stevenson,				-	•
									Miller, Rep.				•	-
									1		thy Skippe			
	Continued on	attached page(s	)			1								
		INST	ruc	TIONS			lt	m 3	Er	nploy	yer(s) Name(s	) and A	ddress(es)	
	no should fil 6617 Idaho		ny lot	obyist registered	under	Section	No.1		aho Eastern O SW 5th Ave #					
1								امل	aho Mint Grow	/OTC	Associat	ion		
1	Ū	•	ort is c	lue on January 3	ı st.		No.	-	SW 5th Ave				83642	
ТО	BE FILED	I	3en Ys				No.							
			•	of State 83720			140.3	,						
	Pho			720-0080 Fax: (208) 334-2	2282		No.4	ı						

<u>_</u>	<u>D</u> a	ate Amount		Name of Legislator Receiving or Benefited							
tem 5	or Ho	use Bill, Resolution or other obbyist was supporting or o		Code	LEGISLATIVE SUB Subject Agriculture, horticulture,		IDENTIFICATION Subject Health service, medicine, drugs				
	Code	Bill, Resolution or Other		٠,	flurning, and livestock	.,	and controlled substances, health				
om u	able)	Legislative Ident, Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals				
01	1	H33, H35, H36,		03	and sports	18 19	Higher education Housing, construction, codes				
	- 1	H37, H38, H152,		, w	Banking, finance, credit and investments	20	Insurance (excluding health				
		H153, H154,		04			insurance)				
		H170, H197a,		05	senior citizene Church and religion	21	Labor, salaries and wages, collective bargaining				
	1	H215, H254,		06		22					
	1	H281, H285a,		07	Ecology, environment, pollution,		judges, crimes, prisons				
	- 1				conservation, zoning, land and		License, permits				
		S1116, S1171		08	water use Education	24 25	Liquor Manufacturing, distribution and				
				09			services				
	1				political parties	26	Natural resources, forest and				
07		H336, H370,		10	Equal rights, civil rights, minority affairs		forest products, fisheries, mining and mining products				
	- 1	S1106, S1139		111		27	Public lands, parks, recreation				
		,			taxation, revenue, budget,	28					
	- 1			12	appropriations, bids, fees, funds Government, county		insurance, public assistance, workmen's compensation				
40	- 1	S1183			Government, federal	29					
16	1	31103		14			streets and roads				
	ŀ			15	Government, special districts Government, state	30	Utilities, communications, televisions, radio, newspaper,				
	- 1			10	Covering it, state		power, CATV, gas				
						31	Other (please specify)				
					Parl	1					
					Lossoyist propries	5	12/28/0				
					The Oth	L	12-28-05				
					Employed No. 1 signature		12/28/R				
					Employer plo. 2 signature		Dyke				
					Employer No. 3 signature		Date				